

Please see reverse side for instructions on how to complete this form.



**State of Rhode Island and Providence Plantations
Board of Elections**

Campaign Finance Unit
50 Branch Avenue, Providence, Rhode Island 02904
Tel. (401) 222-2345
www.elections.ri.gov

**SCHEDULE OF INDEPENDENT EXPENDITURES (CF-8)
(Persons Not Acting in Concert With Others)**

Time Stamp
(For Office Use Only)

Full Name of Person Making Expenditure

Street Address

City/Town, State and Zip Code

Telephone Number

Mailing Address (if different)

City/Town, State and Zip Code

Daytime Telephone Number

Fax Number

E-mail Address

R.I.G.L. 17-25-10(b) states "...any person ... who expends a total that exceeds one hundred dollars (\$100) within a calendar year, file a report within 7 days of making the expenditure..."

The aforementioned Person reports to the Board of Elections that he or she, as the case may be, has expended more than \$100 to support or defeat a Candidate or to advocate the approval or rejection of a question on the ballot as follows:

1. Identify the candidate on the ballot and whether funds were expended to support or oppose this candidate:

_____: ☐ Support ☐ Oppose

2. Identify the question on the ballot and whether funds were expended to support or oppose this question:

_____: ☐ Support ☐ Oppose

Have you reported the expenditure(s) to the campaign treasurer of the Candidate or Political Party Committee on whose behalf the expenditure was made? **Yes** **No** (Please Circle one)

Identify the Candidate or Committee to whom such report was made:

Date of Expenditure	Amount of Expenditure	To Whom Expenditure Was Made	Purpose of Expenditure

The person named below certifies that such person, in making the expenditure(s), was not "acting in concert with any other person or group" as defined in Section 17-25-23 of the Rhode Island General Laws.

Full Name of Person Making Expenditure

Signature of Person Making Expenditure

Address, City/Town, State, Zip Code of Person Making Expenditure

Subscribed and Sworn to me this _____
Date

X _____
Notary Public

INSTRUCTIONS

The information reported is required under the Rhode Island Campaign Contributions and Expenditures Reporting Act of 1974 as amended.

R.I.G.L. 17-25-10(b) states “It shall be lawful, however, for any person, not otherwise prohibited by law and not acting in concert with any other person or group, to expend personally from that person’s own funds a sum which is not to be repaid to him or her for any purpose not prohibited by law to support or defeat a candidate or to advocate the approval or rejection of any question; provided, that any person making the expenditure shall be required to report all his or her expenditures and expenses, if the total of the money so expended exceeds one hundred dollars (\$100) within a calendar year, to the Board of Elections within seven (7) days of making the expenditure and to the campaign treasurer of the candidate or political party committee on whose behalf the expenditure or contribution was made, or to his or her deputy, within seven (7) days of making the expenditure, who causes the expenditures and expenses to be included in his or her reports to the Board of Elections...”

Full Name of Person Making Expenditure – Enter any prefix, the first name, middle initial, last name, and any suffix of the person making the expenditure.

Street Address – Enter the home address of the person making the expenditure(s).

City/Town, State & Zip Code – Enter the city/town, state and zip code of the person making the expenditure(s).

Mailing Address – Enter the mailing address where mail is directed to the person making the expenditure(s).

City/Town, State and Zip Code – Enter the city/town, state and zip code where mail is directed to the person making the expenditure(s).

Telephone Number – Enter the telephone number of the person making the expenditure(s).

Daytime Telephone Number – Enter a secondary telephone for the person making the expenditure(s).

Fax Number – Enter the fax number for the person making the expenditure(s).

E-mail Address – Enter the E-mail address for the person making the expenditure(s).

Name of Candidate – Enter the name of the candidate the person making the expenditure(s) supports or opposes.

Identify the question of the ballot... - Enter the title of the ballot question the person making the expenditure(s) supports or opposes.

Date of Expenditure – Enter the date the expense was incurred.

Amount of Expenditure – Enter the dollar value for the expenditure.

To Whom Expenditure was Made – Enter the name of the entity that was paid.

Purpose of Expenditure – Enter a detailed description of the goods or services provided.

THIS FORM MUST BE SIGNED & NOTARIZED

THIS FORM MUST BE RETURNED TO THE BOARD OF ELECTIONS BEARING ORIGINAL SIGNATURES.

If you have any questions on how to complete this form, please contact the Board of Elections.

PENALTIES: Any person violating the provisions of the Rhode Island Campaign Contributions and Expenditures Reporting Act (Chapter 25 of Title 17 of the Rhode Island General Laws) shall be subject to civil and/or criminal penalties.